PTO/SB/17 (07-06)
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Effective on DEMARKS pursuant to the Consolidated A		Complete if Known								
	Application Num	Application Number 10/722,685								
FEE TRA	Filing Date	N	November 24, 2003							
For FY 2005			First Named Inv	entor E	Brett					
7 A - 1 A - 1 - 1 1 4 - 1	Examiner Name	s	Shay, David M.							
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	3	3735					
TOTAL AMOUNT OF PAYMENT (\$) 620			Attomey Docket	No. E	ExpC:EptaWed					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card	Mon	ay Ordan N	Jone Other (n	lesse iden	+i6/*					
50.2115										
Deposit Account Deposit Account Number: Deposit Account Name: Depo										
Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below										
• · · ·		da				ccept for the ming lee				
under 37 CFR 1 16	and 1 17	r underpayments of	G.Com	-	payments					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION										
1. BASIC FILING, SEARCH,	AND EXA	MINATION FEES	S							
FI	LING FEE	S SEA LEntity	ARCH FEES	EXAM	NATION FEES Small Entity					
Application Type Fed	461	e (\$) Fee	Small Entity (\$) Fee (\$)	Fee (Fees Paid (\$)				
Utility 30	00 15	500	0 250	200	100					
Design 20	00 10	100	0 50	130	65					
Plant 20	00 10	00 300	0 150	160	80					
Reissue 30	00 15	500	0 250	600	300					
Provisional 20	00 10	00 0	0 0	0	0					
2. EXCESS CLAIM FEES					Fac (A)	Small Entity				
Fee Description	dina Daisa				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25				
Each claim over 20 (include Each independent claim over	200	100								
Each independent claim over 3 (including Reissues) Multiple dependent claims						180				
Totai Claims Extr	Muitipie D	ependent Claims								
20 = 0	Fee (\$)	Fee Paid (\$)								
HP = highest number of total claims										
Indep. Claims Extr.	<u>a Ciaims</u>		Fee Paid (\$) \$0							
HP = highest number of independer	nt claims paid									
3. APPLICATION SIZE FEE										
4. Other Fees						Fees Paid (\$)				
Extension for response within second month (37 CFR 1.17(a)(2))										
RCE fee required under 37 CFR 1.17(e)										
Submission of an Inf		· · ·	Statement (1	17(n))						
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SUBMITTED BY	01					
Signature	lan	Aty	Registration No. (Attorney/Agent)	37,621	Telephone	(503) 810-2560
Name (Print/Type)	Karen Dana	Oster	-		Date 1	November 6, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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